24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC		C C00530766
		M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report New re	eport Amends report f	iled on
Full Name of Payee Facebook, Inc.		Date of Public Distribution/Dissemination
<u> </u>		09 29 / 2016
Mailing Address 1 Hacker Way		Amount
City State	Zip Code	20.36
Menlo Park CA	94025	Transaction ID : SE.6462 Date of Disbursement or Obligation
Purpose of Expenditure Ads	Category/ Type 004	09 29 7 2016
Name of Federal Candidate	Support O	office Sought: House District:
HILLARY RODHAM CLINTON	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		oisbursement For: Primary ☐ General ☐ Other (specify) ☐
Full Name of Payee HWS Headway Work Force Solutions		Date of Public Distribution/Dissemination
Malling Address		10 01 7 2016
Mailing Address 421 Fayetteville St #1020		Amount
City State	Zip Code	54206.25
Raleigh NC	27601	Transaction ID : SE.6453 Date of Disbursement or Obligation
Purpose of Expenditure Payroll Estimate for FL Canvassers 10/1-10/19	Category/ Type 001	10 / 01 / 2016
Name of Federal Candidate	Support	Office Sought: House District:
HILLARY RODHAM CLINTON	X Oppose	🗶 President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General Other (specify)
() Company () the definition of the Company ()		
(a) SUBTOTAL of Itemized Independent Expenditures	······	54226.61
(b) SUBTOTAL of Unitemized Independent Expenditures		·
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		•
Emily Buchanan [Electron Signature	conically Filed] Date	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
o.g. w.a. o		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
WOMEN SPEAK OUT PAC	C C00530766			
Check if 24-hour report				
Full Name of Payee HWS Headway Work Force Solutions	Date of Public Distribution/Dissemination			
Mailing Address 421 Fayetteville St #1020	10 01 2016 Amount			
City State Zip Code Raleigh NC 27601	54206.25 Transaction ID : SE.6455			
Purpose of Expenditure Payroll Estimate for FL Canvassers 10/1-10/19 Category/ Type 001	Date of Disbursement or Obligation 10 01 2016			
Name of Federal Candidate Support Office	Sought: House District:			
PATRICK E MURPHY	President Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought Disburs 2016	sement For:			
Full Name of Payee HWS Headway Work Force Solutions	Date of Public Distribution/Dissemination 10 01 7 2016			
Mailing Address 421 Fayetteville St #1020	Amount			
City State Zip Code Raleigh NC 27601	7500.00			
Purpose of Expenditure Mileage Estimate for FL Canvassers 10/1-10/19 Category/ Type 002	Date of Disbursement or Obligation M			
Name of Federal Candidate Support Office	Sought: House District:			
HILLARY RODHAM CLINTON	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought Disbur 2016	sement For: Primary			
(a) SUBTOTAL of Itemized Independent Expenditures	61706.25			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Emily Buchanan [Electronically Filed] Date Og				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

So	chedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48		
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
V	VOMEN SPEAK OUT PAC	C C00530766		
Check if 24-hour report				
	Full Name of Payee HWS Headway Work Force Solutions	Date of Public Distribution/Dissemination		
	Mailing Address 421 Fayetteville St #1020	10 01 2016 Amount		
	City State Zip Code Raleigh NC 27601	7500.00 Transaction ID : SE.6459		
	Purpose of Expenditure Mileage Estimate for FL Canvassers 10/1-10/19 Category/ Type 002	Date of Disbursement or Obligation 10 01 2016		
	Name of Federal Candidate	Out the District		
	PATRICK E MURPHY Support Offic Proceedia Carididate Support Offic Office	e Sought: House District: President Senate State: FL		
	Calendar Year-To-Date Per Election for Office Sought Disb. 2016	ursement For: Primary		
	Full Name of Payee	Date of Public Distribution/Dissemination		
	Mailing Address	Amount		
	City State Zip Code			
	Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation		
	Name of Federal Candidate Support Oppose	e Sought: House District:		
	Calendar Year-To-Date Per Election for Office Sought Disb	ursement For:		
	(a) SUBTOTAL of Itemized Independent Expenditures	7500.00		
	(b) SUBTOTAL of Unitemized Independent Expenditures			
	(c) TOTAL Independent Expenditures	123432.86		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
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